study found that PBD was associated with significantly lower HRQoL than other common childhood conditions. HRQoL might be more affected by depressive symptoms than by manic symptoms. CONCLUSIONS: Despite the increase in the number of clinical trials on treatments for paediatric bipolar disorder, there are currently no published cost-effectiveness studies, cost/resource use data or utilities. These data will be required to inform reliable cost-effectiveness models of treatments in this field.

PMH16
ANALYSIS OF THE ECONOMIC BURDEN AND COST STRUCTURE OF SCHIZOPHRENIA IN GERMANY USING OBSERVATIONAL SICKNESS FUND DATA
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OBJECTIVES: In Germany, about 500,000 people suffer from Schizophrenia. Due to its chronic relapsing course that involves fundamental functional and social impairments, schizophrenia has become a major burden to society. However, studies to determine the economic consequences of the disease have largely been carried out in clinical settings based on a relatively small number of cases. Therefore we aim to assess the medical and non-medical consequences of schizophrenia as well as the cost structure across treatment settings and population characteristics using administrative data. METHODS: Costs attributable to Schizophrenia were estimated using a case-control design, where 26,294 patients drawn from a sickness fund administrative database were matched to 9,319 patients with a confirmed diagnosis of schizophrenia (ICD-10: F20). To obtain balance between both groups treatment of observed and unobserved patient characteristics (age, sex, prior number of drug prescriptions, Elixhauser comorbidities) and to reduce the conditional bias, a geometric matching algorithm was employed. Eventually, costs and other health care resource utilization parameters for cases and controls were recorded during 2008. RESULTS: The annual cost attributable to Schizophrenia amounts to €1061 per patient from the payer’s perspective, and €9927 from the societal perspective. Lost productivity (46.6%), inpatient treatment (29.0%) and nursing care (14.3%) are the major cost drivers of the disease. The burden of disease of Schizophrenia in Germany is estimated to be approximately €5220 million per year from the sickness fund perspective and €9804 million from the societal perspective. CONCLUSIONS: While our calculations still underestimate the true burden of disease due to restricting quality of life to production foregone and to ignoring the impact on family members, considerable direct and indirect costs of schizophrenia highlight the need for further research in order to improve care patterns and to find innovative treatment solutions.

PMH17
ECONOMIC BURDEN IN SCHIZOPHRENIA: A LITERATURE REVIEW
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OBJECTIVES: Schizophrenia places a heavy burden on individuals and their caregivers, as well as potentially placing a large demand on the health care system and its resources. The objective was to understand the cost burden imposed by schizophrenia, and to identify the key drivers of costs. METHODS: We conducted a literature review capturing reviews and recent individual studies on costs of the disease in Europe and US, using Embase and Medline databases. RESULTS: Thirty-six references were included, covering 8 countries (UK, France, Germany, Norway, Canada, USA, India and Thailand). Costs described were mainly those related to care settings (hospital or community), pharmacological and non-pharmacological therapies, comorbidities and family or caregiver costs. The absolute costs were variable across countries (e.g. from 45,100 to 8,250,000 per patient per year), with the major cost drivers being lost productivity (46.6%), inpatient treatment (29.0%) and nursing care (14.3%). CONCLUSIONS: The burden of schizophrenia is significant regardless of the country; however variable estimates of the burden are available in literature due mainly to the treatment regimens used and the approaches to schizophrenia care (e.g. hospital based versus community-based) in respective countries. At present, there is a need of a standard method for quantitatively assessing and aggregating the various aspects of the cost of schizophrenia.

PMH18
TREATMENT PATTERNS AND COSTS IN PATIENTS WITH SCHIZOPHRENIA IN GERMANY
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OBJECTIVES: Schizophrenia is a chronic and disabling severe mental disorder with considerable economic importance. Detailed estimates of treatment patterns and costs of outpatient and inpatient treatment of patients with schizophrenia are an important input factor for health economic cost-effectiveness analyses. Up to date there are several publications which assess the treatment patterns and costs of schizophrenia in Germany. However, most of the information is limited as an input for cost-effectiveness models due to the fact that differentiated micro information about the frequency of contacts in different treatment areas and costs of a single contact are missing. Therefore, we examine the treatment patterns and micro costs of treatment of schizophrenia re-